

DATE: \_\_\_\_\_

**BOL#**

Job# 418762

Truck#

### Check Box

- (1) *Verify information on ID tag matches information on the section.*
- (2) *Verify all welds on the section are completed.*
- (3) *Verify there is no outer damage to the poles.*
- (4) *Check quality of surface finish.*
- (5) *Verify there are no loose items within the section.*
- (6) *Verify protective caps are in place where required.*
- (7) *Verify there is proper spacing and protection to prevent shipping damage.*
- (8) *Verify all hardware is palletized and stretch wrapped, with job number on each side.*
- (9) *Purple flag the trailer once the load has been verified as correct.*

16 male sections

**Comments:**

**NOTE: STOP SHIPMENT IF A PROBLEM IS FOUND AND NOTIFY MANAGEMENT.**

Inspector:

**Forklift Driver (if Needed):**

# Sabre Industries™

## BILL OF LADING - Short Form. Not Negotiable

418762

L3

309163

Name of Carrier: <b>Customer Pickup</b>		Carrier Number: <b>MSF-309163</b>	BOL No.
Carrier Code: <b>CPUX</b>	Pick-Up Date and Time: <b>01/04/19</b>		Delv. Date and Time: <b>01/07/19 00:00</b>
TO Consignee: <b>PG&amp;E</b>	From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To: <input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party	
Street:			
City/State:	Zip Code:		
Delivery/Special Instructions: <b>Dravilla CA 95065 Charlene McLeod 209-492-1669</b>			

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
	418762 Load#: 0	17,228	0
	0		
1	418762-1-1 Customer PO: 3501176797 PO Ln: 5 418762-3509-B	824	
1	418762-1-2 Customer PO: 3501176797 PO Ln: 2 418762-3509-B	824	
1	418762-1-7 Customer PO: 3501176797 PO Ln: 5 418762-3509-B	824	
1	418762-1-8 Customer PO: 3501176797 PO Ln: 5 418762-3509-B	821	
1	418762-2-1 Customer PO: 3501176797 PO Ln: 1 418762-3510-T	1,141	
1	418762-3-1 Customer PO: 3501176797 PO Ln: 6 418762-3510-T	1,141	

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR [Signature] DRIVER X

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR [Signature]

Notify if problem arises in route or at delivery: Name Transportation Manager Telephone No.  After Hrs. No.

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE: The agreed or declared value of the property is specifically stated by the shipper to be \$ 100,000.00

SHIPPER/CONSIGNOR [Signature]

**PRE-SHIPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed [Signature] Driver Truck Number 112 511

Witnessed TYCHEL MARIE Date 1-4-19 Time   
Name of Trucking Company

Sabre Representative

**POST-SHIPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed  Company   
Crew Foreman

Case: 19-30088 Doc# 476-2 Filed: 02/19/19 Entered: 02/19/19 10:34:00 Page 2  
Witnessed  Date of 27 Time   
Driver

Name of Carrier: <b>Customer Pickup</b>		Carrier Number:	BOL No. <b>MSF-309163</b>
Carrier Code: <b>CPUX</b>		Pick-Up Date and Time: <b>01/04/19</b>	Delv. Date and Time: <b>01/07/19 00:00</b>
TO Consignee: <b>PG&amp;E</b>		From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To:  <input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party
Street:			
City/State:	Zip Code:		
<b>Orville</b>	<b>CA 95965</b>		
Delivery/Special Instructions: <b>Charlene McLeod 209-497-1669</b>			

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
1	418762-3-2 Customer PO: 3501176797 PO Ltr: 8 418762-3510-T	1,141	
1	418762-2-1 Customer PO: 3501176797 PO Ltr: 4 418762-3511-B	892	
1	418762-3-1 Customer PO: 3501176797 PO Ltr: 8 418762-3513-B	1,268	
1	418762-3-2 Customer PO: 3501176797 PO Ltr: 8 418762-3513-B	1,268	
1	418762-4-6 Customer PO: 3501176797 PO Ltr: 7 418762-3525-T	1,010	
1	418762-4-2 Customer PO: 3501176797 PO Ltr: 1 418762-3526-B	837	
1	418762-4-3 Customer PO: 3501176797 PO Ltr: 1 418762-3526-B	837	
1	418762-4-8 Customer PO: 3501176797 PO Ltr: 7 418762-3526-B	837	

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR \_\_\_\_\_ DRIVER \_\_\_\_\_

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR \_\_\_\_\_

Notify if problem arises in route or at delivery: Name Transportation Manager Telephone No. \_\_\_\_\_ Alter Hrs. No. \_\_\_\_\_

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ 100,000.00

SHIPPER/CONSIGNOR \_\_\_\_\_

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed \_\_\_\_\_ Truck Number \_\_\_\_\_  
Driver

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Name of Trucking Company

Sabre Representative \_\_\_\_\_

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_  
Crew Foreman

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Driver

**BILL OF LADING - Short Form. Not Negotiable**

Name of Carrier: <b>Customer Pickup</b>		Carrier Number: <b>MSF-309163</b>	BOL No.
Carrier Code: <b>CPUX</b>	Pick-Up Date and Time: <b>01/04/19</b>	Delv. Date and Time: <b>01/07/19 00:00</b>	
TO Consignee: <b>PG&amp;E</b>	From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To:	
Street:		<input type="checkbox"/> Shipper	<input checked="" type="checkbox"/> Consignee
City/State:			<input type="checkbox"/> Third Party
Zip Code: <b>Orville CA 95965</b>			
Delivery/Special Instructions: <b>Charlene McLeod 209-497-1669</b>			

[illegible]

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR \_\_\_\_\_ DRIVER \_\_\_\_\_

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR \_\_\_\_\_

Notify if problem arises in route or at delivery: Name      Transportation Manager      Telephone No.      After Hrs. No.:

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ 100,000.00

SHIPPER/CONSIGNOR \_\_\_\_\_

**PRE-SHIPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed \_\_\_\_\_ Truck Number \_\_\_\_\_  
Driver

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Name of Trucking Company

Sabre Representative \_\_\_\_\_

**POST-SHIPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_  
Crew Foreman

Case: 19-30088 Doc# 476-2 Filed: 02/19/19 Entered: 02/19/19 10:34:00 Page 4

Name of Carrier: <b>Customer Pickup</b>		Carrier Number:	BOL No. <b>MSF-309163</b>
Carrier Code: <b>CPUX</b>		Pick-Up Date and Time: <b>01/04/19</b>	Delv. Date and Time: <b>01/07/19 00:00</b>
TO Consignee: <b>PG&amp;E</b>		From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To:  <input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party
Street:			
City/State:	Zip Code:		
<b>Oroville</b>	<b>CA 95965</b>		
Delivery/Special Instructions: <b>Charlene McLeod 709-492-1669</b>			

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
	<b>Please Deliver to the following location:</b>		
	<b>2502 South 5th Ave. Oroville, CA 95965</b>		
	<b>72 Hour Advanced Notice by driver.</b>		

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR \_\_\_\_\_ DRIVER \_\_\_\_\_

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR \_\_\_\_\_

Notify If problem arises in route or at delivery: Name Transportation Manager Telephone No. \_\_\_\_\_ After Hrs. No. \_\_\_\_\_

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ **100,000.00**

SHIPPER/CONSIGNOR \_\_\_\_\_

**PRE-SHIPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed \_\_\_\_\_ Truck Number \_\_\_\_\_  
Driver

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Name of Trucking Company

Sabre Representative \_\_\_\_\_

**POST-SHIPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_  
Crew Foreman

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Driver



THE NEW

**Sabre-FWT**

JOB#

418762

BOL#

~~309163~~ 309163

SABRE-FWT CORPORATION'S FREIGHT IS VERY TIME SENSITIVE

1. I UNDERSTAND THE HOURS NEEDED TO REACH THE DESTINATION AND I HAVE THE AVAILABLE DRIVING HOURS NEEDED TO COMPLETE THE DELIVERY IN A TIMELY MANNER.
2. I CAN COVER THE MILES NEEDED TO DRIVE AND BE ON TIME PER APPT DAY AND TIME, (LISTED ON BILL OF LADING) AND DELIVER ON TIME ACCORDING TO ACTUAL LOAD TIME LEAVING SABRE FACILITIES.
3. IN THE EVENT OF ANY SITUATION OR CIRCUMSTANCE WHICH MIGHT CAUSE DELAY IN DELIVERY, I AGREE TO GIVE A 24-48 HOUR NOTICE, OR AS MUCH NOTICE AS POSSIBLE, OF SUCH POSSIBLE DELAY TO SABRE-FWT COMMUNICATIONS CORPORATION BY CALLING SABRE AT 866-254-3707 AND INFORM SABRE OF THE DELAY.

DRIVER(S) PLEASE GO OVER ITEMS LISTED ABOVE AND VERIFY ALL ARE IN ORDER TO MAKE SURE YOU UNDERSTAND LOAD SEVERITY AND YOU CAN DELIVER LOAD ON TIME. IF ANSWER IS (NO) TO ANY OF THE ABOVE YOU NEED TO CALL YOUR DISPATCH PRIOR TO LOADING AND/OR MOVING THE LOAD.

IF YOU DO NOT NOTIFY AND/OR DO NOT MAKE ON TIME DELIVERY DUE TO DRIVER NEGLIGENCE, DAMAGES LISTED BELOW COULD BE APPLIED AND CHARGES/DETENTION WILL BE ASSESSED TO YOUR COMPANY.

1. BACK CHARGES FOR CRANE DOWNTIME.
2. BACK CHARGES FOR CREW DOWNTIME.

CARRIER(S) NOT LIABLE FOR DELAY WHEN SUCH DELAY IS CAUSED BY ACT OF GOD, WORK STOPPAGE, IMPASSABLE HIGHWAYS, BRIDGES, WAR, REBELLION, RIOT OR THE ACT OF PUBLIC AUTHORITY.

SAFETY REQUIREMENTS

When signing this document the driver verifies they have all the personal protective equipment (PPE) required (i.e. ANSI-approved safety glasses/prescription safety glasses with side shields, high-visibility reflective vest, work gloves appropriate for the potential hazards {Jersey gloves are not permitted to be worn as the only means of protection}, and protective toe footwear that meet the safety-toe specifications as ASTM F2413-05 with compression rating of C75). When required hearing protection devices and Fire Retardant clothing.

DRIVER SIGNATURE:

*Luas Allen*



## Miscellaneous Shipment Authorization

Pack ID 309163	Customer PG&E	Site State CA	Site Name PO 3501176797 WPES
	Requested By cgarcia	Site Country	
Ship Date 1/4/2019	Arrive Date/Time 01/07/2019 12:00 AM	Model	Height 0.00

ShipmentType 4. CPU	Material To Ship Utility	Est Truck Loads	Ship From Bossier City
Cosignee PG&E	Contact Name\Phone\Cell Charlene McLoed 209-492-1669	Ship Address Oroville, CA 95965	

**Directions**

SO# 418762, PG&E, PO# 3501176797

Please deliver to the following location:

2592 South 5th Ave. Oroville, CA 95965

72 Hour Advanced Notice by driver.

Line	Qty	Part Number	Description	Weight
Order Number: 418762				
2	1		418762-3509-B	824.00
3	1		418762-3526-B	837.00
4	1		418762-3526-B	837.00
5	1		418762-3513-B	1,268.00
6	1		418762-3509-B	824.00
7	1		418762-3611-B	892.00
8	1		418762-3526-B	837.00
9	1		418762-3511-B	892.00
10	1		418762-3509-B	824.00
11	1		418762-3513-B	1,268.00
12	1		418762-3509-B	824.00
13	1		418762-3539-B	1,387.00
14	1		418762-3510-T	1,141.00
15	1		418762-3510-T	1,141.00
16	1		418762-3510-T	1,141.00
17	1		418762-3525-T	1,010.00
18	1		418762-3536-T	1,281.00

Approved By: kharper

<b>Total Weight:</b>	<b>17,228.00</b>
----------------------	------------------

MSE-309163

Customer Pickup

01/04/19

01/07/19 00:00

CPUX

PG&E

Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111

X

Oroville CA 95965

Charlene McLoed  
209-492-1669

			17,228	0
	418762 Load#: 0			
	0			
1	418762-1-11	Customer PO: 3501176797 PO Ln: 5 418762-3509-B	824	
1	418762-1-2	Customer PO: 3501176797 PO Ln: 2 418762-3509-B	824	
1	418762-1-7	Customer PO: 3501176797 PO Ln: 5 418762-3509-B	824	
1	418762-1-8	Customer PO: 3501176797 PO Ln: 5 418762-3509-B	824	
1	418762-2-1	Customer PO: 3501176797 PO Ln: 4 418762-3510-T	1,141	
1	418762-3-1	Customer PO: 3501176797 PO Ln: 8 418762-3510-T	1,141	

100,000.00



Customer Pickup

MSE-309163

CPUX

01/04/19

01/07/19 00:00

PG&E

Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111

X

Oroville CA 95965

Charlene McLoed  
209-492-1669

1	418762-3-2	Customer PO: 3501176797 PO Ln: 8 418762-3510-T	1,141
1	418762-2-1	Customer PO: 3501176797 PO Ln: 4 418762-3511-B	892
1	418762-3-1	Customer PO: 3501176797 PO Ln: 8 418762-3513-B	1,268
1	418762-3-2	Customer PO: 3501176797 PO Ln: 8 418762-3513-B	1,268
1	418762-4-6	Customer PO: 3501176797 PO Ln: 7 418762-3525-T	1,010
1	418762-4-2	Customer PO: 3501176797 PO Ln: 1 418762-3526-B	837
1	418762-4-3	Customer PO: 3501176797 PO Ln: 1 418762-3526-B	837
1	418762-4-9	Customer PO: 3501176797 PO Ln: 7 418762-3526-B	837

100,000.00

Customer Pickup

MSE-309163

CPUX

01/04/19

01/07/19 00:00

PG&E

Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111

X

Oroville CA 95965

Charlene McLoed  
209-492-1669

1	418762-6-1	Customer PO: 3501176797 PO Ln: 3 418762-3536-T	1,281
1	418762-6-1	Customer PO: 3501176797 PO Ln: 3 418762-3539-B	1,387
1	418762-5-1	Customer PO: 3501176797 PO Ln: 6 418762-3611-B	892

100,000.00

MSE-309163

01/07/19 00:00

Customer Pickup

01/04/19

CPUX

Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111

X

PG&E

Oroville CA 95965

Charlene McLoed  
209-492-1669

Please deliver to the following location:

2592 South 5th Ave. Oroville, CA 95965

72 Hour Advanced Notice by driver.

100,000.00



# Load Verification Inspection

Check Box

DATE: \_\_\_\_\_

BOL# \_\_\_\_\_

Job# \_\_\_\_\_

Truck# \_\_\_\_\_

(1) Verify information on ID tag matches information on the section.	
(2) Verify all welds on the section are completed.	
(3) Verify there is no outer damage to the poles.	
(4) Check quality of surface finish.	
(5) Verify there are no loose items within the section.	
(6) Verify protective caps are in place where required.	
(7) Verify there is proper spacing and protection to prevent shipping damage.	
(8) Verify all hardware is palletize and stretch wrapped, with job number and ship date.	
(9) Purple flag the trailer once the load has been verified as correct.	

80 H2-6-1  
65 H1-4-6  
80 C1-3-1  
70C1-2-1  
80C1 3-2

1-2 2-1 4-3  
6-1 4-9 3-1  
3-2 5-1 1-7  
1-8 1-11 4-2

5.7 make section  
5.7 remove section

Comments:

NOTE: STOP SHIPMENT IF A PROBLEM IS FOUND AND NOTIFY MANAGEMENT.

Inspector: \_\_\_\_\_

Forklift Driver (if Needed): \_\_\_\_\_



Load Verification Inspection

DATE: \_\_\_\_\_ BOL# 3001123 Job# 4187162 Truck# \_\_\_\_\_ Check Box

- (1) Verify information on ID tag matches information on the section.
- (2) Verify all welds on the section are completed.
- (3) Verify there is no outer damage to the poles.
- (4) Check quality of surface finish.
- (5) Verify there are no loose items within the section.
- (6) Verify protective caps are in place where required.
- (7) Verify there is proper spacing and protection to prevent shipping damage.
- (8) Verify all hardware is palletize and stretch wrapped, with job number and ship date.
- (9) Purple flag the trailer once the load has been verified as correct.

6-1 4-9 4-2  
1-2 5-1 1-7  
3-2 2-1 3-1  
1-8 1-11 4-3

12-male section

~~5-1 1-11 4-3~~

Comments:

NOTE: STOP SHIPMENT IF A PROBLEM IS FOUND AND NOTIFY MANAGEMENT.

Inspector: Anthony S. G. Jr.  
Forklift Driver (if Needed): \_\_\_\_\_

# Sabre Industries™

## BILL OF LADING - Short Form. Not Negotiable

418823

pg 1

309179

Name of Carrier: <b>CH Robinson</b>	Carrier Number:	BOL No. <b>L1</b>
Carrier Code: <b>CPUP</b>	Pick-Up Date and Time: <b>12/26</b>	Delv. Date and Time: <b>1/2/18</b>
TO Consignee: <b>Pete</b>	From Shipper:	Send All Freight Bills To: <input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party
Street: <b>2593 South 5th Ave</b>		
City/State: <b>Droville, CA</b>	Zip Code: <b>95965</b>	
Delivery/Special Instructions: <b>Charrine McLeod 209-492-1694</b>		

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions		Weight	Miles
	<b>418823 35011767 92</b>			
1	1-9	CI US		
1	1-3	CI US		
1	1-2	CI US		
1	3-1	HI US		
1	3-6	HI US		
1	1-8	CI US		
1	3-10	HI US		
1	1-6	CI US		
1	1-7	CI US		
1	3-9	HI US		
1	1-4	CI US		

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR **Kenny Hinkle**

DRIVER **[Signature]**

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR **[Signature]**

Notify if problem arises in route or at delivery: Name Transportation Manager Telephone No.  After Hrs. No.

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ 1000

SHIPPER/CONSIGNOR **[Signature]**

PRE-SHIPING INSPECTION. I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed **[Signature]** Driver Truck Number **41 723**

Witnessed **[Signature]** Name of Trucking Company **[Signature]** Date **12/31/18** Time

Sabre Representative **[Signature]**

POST-SHIPING INSPECTION. I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed  Crew Foreman Company



# Sabre Industries™

## BILL OF LADING - Short Form. Not Negotiable

418823 PG 2

Name of Carrier:	Carrier Number:	BOL No. 21
Carrier Code:	Pick-Up Date and Time:	Delv. Date and Time:
TO Consignee:	From Shipper:	Send All Freight Bills To:
Street:		<input type="checkbox"/> Shipper <input type="checkbox"/> Consignee <input type="checkbox"/> Third Party
City/State:	Zip Code:	
Delivery/Special Instructions:		

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
	418823 DO # 350 1176792		
1	3-5 H165 B		
1	2-1 C175 B		
1	3-8 H165 B		
1	3-2 H165 B		
1	1-1 C145 B		
	1 C175 B		
	9 C165 B		
	7 H165 B		

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR [Signature] DRIVER [Signature]

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR [Signature]

Notify if problem arises in route or at delivery: Name Transportation Manager Telephone No.                      After Hrs. No.                     

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$                     

SHIPPER/CONSIGNOR [Signature]

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

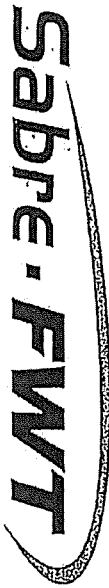
Signed [Signature] Driver Truck Number 17

Witnessed                      Date                      Time                       
Name of Trucking Company

Sabre Representative                     

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, damaged in any way beyond the form, fit or function of the project.

Signed                      Company                       
Crew Foreman



# Load Verification Inspection

DATE: \_\_\_\_\_

BOL# \_\_\_\_\_

Job# \_\_\_\_\_

823

Truck# \_\_\_\_\_

Check Box

- (1) Verify information on ID tag matches information on the section.
- (2) Verify all welds on the section are completed.
- (3) Verify there is no outer damage to the poles.
- (4) Check quality of surface finish.
- (5) Verify there are no loose items within the section.
- (6) Verify protective caps are in place where required.
- (7) Verify there is proper spacing and protection to prevent shipping damage.
- (8) Verify all hardware is palletize and stretch wrapped, with job number and ship date.
- (9) Purple flag the trailer once the load has been verified as correct.

1-9 1-3 1-2 3-1  
3-6 1-8 3-10 1-6  
1-7 3-9 1-4 3-5  
2-1 3-8 3-2 1-1

16 male sections

2- 41

Comments:

NOTE: STOP SHIPMENT IF A PROBLEM IS FOUND AND NOTIFY MANAGEMENT.

Inspector

Anthony S. Sgarbi

Forklift Driver (if Needed):



Load Verification Inspection

DATE: 12-19-18      BOL#      Job# 418762      Truck#      Check Box

(1) Verify information on ID tag matches information on the section.	
(2) Verify all welds on the section are completed.	
(3) Verify there is no outer damage to the poles.	
(4) Check quality of surface finish.	
(5) Verify there are no loose items within the section.	
(6) Verify protective caps are in place where required.	
(7) Verify there is proper spacing and protection to prevent shipping damage.	
(8) Verify all hardware is palletize and stretch wrapped, with job number and ship date.	
(9) Purple flag the trailer once the load has been verified as correct.	

41 70  
5-1 4-3 1-14 1-13  
1-6 4-2 4-9 1-7  
1-1 1-12 4-8 1-3  
1-5 4-1 1-9 4-4  
1-10 1-11 1-2  
1-8 4-7 4-5  
1-4

23 Female sections

Comments:

NOTE: STOP SHIPMENT IF A PROBLEM IS FOUND AND NOTIFY MANAGEMENT.

Inspector: Anthony Grazzi  
Forklift Driver (if Needed): \_\_\_\_\_

**Sabre Industries™****BILL OF LADING - Short Form. Not Negotiable**Name of Carrier: **Customer Pickup**

Carrier Number:

BOL No.

**MSF-309181**Carrier Code: **CRUX**

Pickup Date and Time:

Del. Date and Time: **01/07/19 00:00**TO Consignee: **POEE**From Shipper:  
**Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111**

Send All Freight Bills To:



Shipper



Consignee



Third Party

Street:

City/State:

**Orville****CA**

Zip Code:

**95965**

Delivery/Special Instructions:

**Charlotte McLeod  
709-492-1669**

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
	<b>418823 Load # 0</b>	<b>23.001</b>	<b>0</b>
	<b>0</b>		
1	<b>418823-1-1 Customer PO: 3501176792 PO Ltr: 2 Class-C1 - 65" [11.5' sealed] M350037 118823-3508-1</b>	<b>1,025</b>	
1	<b>418823-1-2 Customer PO: 3501176792 PO Ltr: 2 418823-3508-T</b>	<b>1,025</b>	
1	<b>418823-1-3 Customer PO: 3501176792 PO Ltr: 2 418823-3508-T</b>	<b>1,025</b>	
1	<b>418823-1-4 Customer PO: 3501176792 PO Ltr: 4 418823-3508-T</b>	<b>1,025</b>	
1	<b>418823-1-5 Customer PO: 3501176792 PO Ltr: 4 418823-3508-T</b>	<b>1,025</b>	
1	<b>118823-1-6 Customer PO: 3501176792 PO Ltr: 1 118823-3508-1</b>	<b>1,025</b>	

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR: *Harry Henpe*DRIVER: *[Signature]*

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR: *[Signature]*Notify if problem arises in route or at delivery: Name Transportation Manager

Telephone No. \_\_\_\_\_

After Hrs. No.

**100,000.00**

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ \_\_\_\_\_

SHIPPER/CONSIGNOR: *[Signature]*

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed: *[Signature]*

Driver

Truck Number: **739**Witnessed: *American Archive*

Name of Trucking Company

Date: **1/4/19**

Time: \_\_\_\_\_

Sabre Representative: *[Signature]*

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed: *[Signature]*

Crew Foreman

Company: \_\_\_\_\_

Case: 19-30088 Doc# 476-2

Filed: 02/19/19

Entered: 02/19/19 10:34:00

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Witnessed: \_\_\_\_\_

Date: **02/27**

Time: \_\_\_\_\_



## BILL OF LADING - Short Form. Not Negotiable

Name of Carrier: <b>Customer Pickup</b>	Carrier Number:	BOL No. <b>MSF-309181</b>
Carrier Code: <b>CPUX</b>	Pick-Up Date and Time: <b>01/07/19</b>	Delv. Date and Time: <b>01/07/19 00:00</b>
TO Consignee: <b>PG&amp;E</b>	From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To: <input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party
Street:		
City/State: <b>Orrville CA</b>	Zip Code: <b>95965</b>	
Delivery/Special Instructions: <b>Charlene McLeod 209-492-1669</b>		

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
1	418823-1-7 Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025	
1	418823-1-8 Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025	
1	418823-1-9 Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025	
1	118823-1-5 Customer PO: 3501176792 PO Ln: 1 118823-3509-B	821	
1	418823-2-1 Customer PO: 3501176792 PO Ln: 1 418823-3510-T	1,141	
1	418823-3-1 Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010	
1	418823-3-10 Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010	
1	418823-3-2 Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010	

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR \_\_\_\_\_ DRIVER \_\_\_\_\_

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR \_\_\_\_\_

Notify if problem arises in route or at delivery: Name \_\_\_\_\_ Transportation Manager \_\_\_\_\_ Telephone No. \_\_\_\_\_ After Hrs. No. **100,000.00**

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ \_\_\_\_\_

SHIPPER/CONSIGNOR \_\_\_\_\_

**PRE-SHIPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages:

Signed \_\_\_\_\_ Truck Number \_\_\_\_\_  
Driver

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Name of Trucking Company

Sabre Representative \_\_\_\_\_

**POST-SHIPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_  
Crew Foreman

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Driver

Case: 19-30088 Doc# 476-2 Filed: 02/19/19 Entered: 02/19/19 10:34:00 Page 19





## BILL OF LADING - Short Form. Not Negotiable

Name of Carrier: <b>Customer Pickup</b>	Carrier Number:	BOL No. <b>MSF-309181</b>
Carrier Code: <b>CPUX</b>	Pick Up Date and Time: <b>01/04/19</b>	Delv. Date and Time: <b>01/07/19 00:00</b>
TO Consignee: <b>PGEE</b>	From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To: <input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party
Street:		
City/State: <b>Orville CA 95965</b>	Zip Code:	
Delivery/Special Instructions: <b>CHARLIE McLeod 709-492-1669</b>		

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
1	418823-3-3 Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010	
1	418823-3-4 Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010	
1	418823-3-5 Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010	
1	118823-3-6 Customer PO: 3501176792 PO Ln: 3 118823-3525-T	1,010	
1	418823-3-7 Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010	
1	418823-3-8 Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010	
1	418823-3-9 Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010	
1	418823-3-3 Customer PO: 3501176792 PO Ln: 3 418823-3525-B	837	

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker, Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR \_\_\_\_\_ DRIVER \_\_\_\_\_

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR \_\_\_\_\_

Notify if problem arises in route or at delivery: Name Transportation Manager Telephone No. \_\_\_\_\_ After Hrs. No. 100,000.00

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ \_\_\_\_\_

SHIPPER/CONSIGNOR \_\_\_\_\_

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed \_\_\_\_\_ Truck Number \_\_\_\_\_  
Driver

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Name of Trucking Company

Sabre Representative \_\_\_\_\_

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_  
Crew Foreman

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
of 27





## BILL OF LADING - Short Form. Not Negotiable

Name of Carrier: <b>Customer Pickup</b>	Carrier Number:	BOL No. <b>MSF-309181</b>
Carrier Code: <b>CPUX</b>	Pick Up Date and Time: <b>01/10/19</b>	Delv. Date and Time: <b>01/10/19 00:00</b>
TO Consignee: <b>PS&amp;E</b>	From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To: <input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party
Street:		
City/State: <b>Oroville CA</b>	Zip Code: <b>95965</b>	
Delivery/Special Instructions: <b>Charlene McLeod 209-492-1669</b>		

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
1	418823-3-4 Customer PO: 3501176792 PO Ln: 3 418823-3526-B	837	
1	418823-3-7 Customer PO: 3501176792 PO Ln: 5 418823-3526-B	837	
	Please deliver to the following location:		
	2502 South 5th Ave. Oroville, CA 95905		
	24 Hour Advanced Notice by driver.		

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR \_\_\_\_\_ DRIVER \_\_\_\_\_

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR \_\_\_\_\_

Notify if problem arises in route or at delivery: Name \_\_\_\_\_ Transportation Manager \_\_\_\_\_ Telephone No. \_\_\_\_\_ After Hrs. No. **100,000.00**

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ \_\_\_\_\_

SHIPPER/CONSIGNOR \_\_\_\_\_

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed \_\_\_\_\_ Truck Number \_\_\_\_\_  
Driver

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Name of Trucking Company

Sabre Representative \_\_\_\_\_

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_  
Crew Foreman

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Driver

THE NEW

**Sabre-FWT**

JOB#

418823

BOL#

309181

SABRE-FWT CORPORATION'S FREIGHT IS VERY TIME SENSITIVE

1. I UNDERSTAND THE HOURS NEEDED TO REACH THE DESTINATION AND I HAVE THE AVAILABLE DRIVING HOURS NEEDED TO COMPLETE THE DELIVERY IN A TIMELY MANNER.
2. I CAN COVER THE MILES NEEDED TO DRIVE AND BE ON TIME PER APPT DAY AND TIME, (LISTED ON BILL OF LADING) AND DELIVER ON TIME ACCORDING TO ACTUAL LOAD TIME LEAVING SABRE FACILITIES.
3. IN THE EVENT OF ANY SITUATION OR CIRCUMSTANCE WHICH MIGHT CAUSE DELAY IN DELIVERY, I AGREE TO GIVE A 24-48 HOUR NOTICE, OR AS MUCH NOTICE AS POSSIBLE, OF SUCH POSSIBLE DELAY TO SABRE-FWT COMMUNICATIONS CORPORATION BY CALLING SABRE AT 866-254-3707 AND INFORM SABRE OF THE DELAY.

DRIVER(S) PLEASE GO OVER ITEMS LISTED ABOVE AND VERIFY ALL ARE IN ORDER TO MAKE SURE YOU UNDERSTAND LOAD SEVERITY AND YOU CAN DELIVER LOAD ON TIME. IF ANSWER IS (NO) TO ANY OF THE ABOVE YOU NEED TO CALL YOUR DISPATCH PRIOR TO LOADING AND/OR MOVING THE LOAD.

IF YOU DO NOT NOTIFY AND/OR DO NOT MAKE ON TIME DELIVERY DUE TO DRIVER NEGLIGENCE, DAMAGES LISTED BELOW COULD BE APPLIED AND CHARGES/DETENTION WILL BE ASSESSED TO YOUR COMPANY.

1. BACK CHARGES FOR CRANE DOWNTIME.
2. BACK CHARGES FOR CREW DOWNTIME.

CARRIER(S) NOT LIABLE FOR DELAY WHEN SUCH DELAY IS CAUSED BY ACT OF GOD, WORK STOPPAGE, IMPASSABLE HIGHWAYS, BRIDGES, WAR, REBELLION, RIOT OR THE ACT OF PUBLIC AUTHORITY.

THE REQUIREMENTS

When signing this document the driver verifies they have all the personal protective equipment (PPE) required (i.e. ANSI-approved safety glasses/prescription safety glasses with side shields, high-visibility reflective vest, work gloves appropriate for the potential hazards {Jersey gloves are not permitted to be worn as the only means of protection}, and protective toe footwear that meet the safety-toe specifications as ASTM F2413-05 with compression of C75). When required hearing protection devices and Fire Retardant clothing.

DRIVER SIGNATURE: \_\_\_\_\_

## Miscellaneous Shipment Authorization

<b>Pack ID</b> 309181	<b>Customer</b> PG&E	<b>Site State</b> CA	<b>Site Name</b> PO 3501176792 WPES
	<b>Requested By</b> cgarcia	<b>Site Country</b>	
<b>Ship Date</b> 1/4/2019	<b>Arrive Date/Time</b> 01/07/2019 12:00 AM	<b>Model</b>	<b>Height</b> 0.00

---

<b>ShipmentType</b> 4. CPU	<b>Material To Ship</b> Utility	<b>Est Truck Loads</b>	<b>Ship From</b> Bossier City
<b>Cosignee</b> PG&E	<b>Contact Name\Phone\Cell</b> Charlene McLoed 209-492-1669	<b>Ship Address</b> Oroville, CA 95965	

### Directions

SO# 418823, PG&E, PO# 3501176792

Please deliver to the following location:

2592 South 5th Ave. Oroville, CA 95965

72 Hour Advanced Notice by driver.

Line	Qty	Part Number	Description	Weight
Order Number: 418823				
2	1	418823-3508-T		1,025.00
3	1	418823-3508-T		1,025.00
4	1	418823-3508-T		1,025.00
5	1	418823-3525-T		1,010.00
6	1	418823-3525-T		1,010.00
7	1	418823-3508-T		1,025.00
8	1	418823-3508-T		1,025.00
9	1	418823-3525-T		1,010.00
10	1	418823-3508-T		1,025.00
11	1	418823-3525-T		1,010.00
12	1	418823-3525-T		1,010.00
13	1	418823-3508-T		1,025.00
14	1	418823-3525-T		1,010.00
15	1	418823-3508-T		1,025.00
16	1	418823-3525-T		1,010.00
17	1	418823-3508-T		1,025.00
18	1	418823-3525-T		1,010.00
19	1	418823-3510-T		1,141.00
20	1	418823-3525-T		1,010.00
21	1	418823-3525-T		1,010.00
22	1	418823-3526-B		837.00
23	1	418823-3526-B		837.00
24	1	418823-3509-B		824.00
25	1	418823-3526-B		837.00
<b>Total Weight:</b>				<b>23,801.00</b>

Approved By: cgarcia

Customer Pickup

MSE-309181

CPUX

01/04/19

01/07/19 00:00

PG&E

Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111

X

Oroville CA 95965

Charlene McLoed  
209-492-1669

418823 Load#: 0

23,801 0

0

1	418823-1-1	Customer PO: 3501176792 PO Ln: 2 Class-C1 - 65' [11.5' embed]-M350087 418823-3508-T	1,025
1	418823-1-2	Customer PO: 3501176792 PO Ln: 2 418823-3508-T	1,025
1	418823-1-3	Customer PO: 3501176792 PO Ln: 2 418823-3508-T	1,025
1	418823-1-4	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025
1	418823-1-5	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025
1	418823-1-6	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025

100,000.00

Customer Pickup

MSE-309181

CPUX

01/04/19

01/07/19 00:00

PG&E

Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111

X

Oroville CA 95965

Charlene McLoed  
209-492-1669

1	418823-1-7	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025
1	418823-1-8	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025
1	418823-1-9	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025
1	418823-1-5	Customer PO: 3501176792 PO Ln: 4 418823-3509-B	824
1	418823-2-1	Customer PO: 3501176792 PO Ln: 1 418823-3510-T	1,141
1	418823-3-1	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010
1	418823-3-10	Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010
1	418823-3-2	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010

100,000.00

Customer Pickup

MSE-309181

CPUX

01/04/19

01/07/19 00:00

PG&E

Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111

X

Oroville CA 95965

Charlene McLoed  
209-492-1669

1	418823-3-3	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010
1	418823-3-4	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010
1	418823-3-5	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010
1	418823-3-6	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010
1	418823-3-7	Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010
1	418823-3-8	Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010
1	418823-3-9	Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010
1	418823-3-3	Customer PO: 3501176792 PO Ln: 3 418823-3526-B	837

100,000.00



Customer Pickup

MSE-309181

CPUX

01/04/19

01/07/19 00:00

PG&E

Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111

X

Oroville CA 95965

Charlene McLoed  
209-492-1669

1	418823-3-4	Customer PO: 3501176792 PO Ln: 3 418823-3526-B	837
1	418823-3-7	Customer PO: 3501176792 PO Ln: 5 418823-3526-B	837

Please deliver to the following location:

2592 South 5th Ave. Oroville, CA 95965

72 Hour Advanced Notice by driver.

100,000.00